JC13 R PCT/PTO 28 MAR 2005

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	Complete if Known									
Fees pursuant to the	Application Nu	mber	To Be Assigned							
FEE	Filing Date		Concurrently Herewith							
	First Named In	ventor	Ralph A. Stearns, et al.							
	Examiner Nam	e	Unknown							
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	nit Unknown				コ	
TOTAL AMOUNT OF PAYMENT (\$) \$1,340.00				Attorney Docke	et No.	2864				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 21-0550 Deposit Account Name: U.S. Surgical Corp.										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
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under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card										
information and auth			ublic. Credit card in	iormauon snoulu i	not be inc	idded on ai	is ioriii. Fio	VIGO CIOGIL CAIG		
FEE CALCULA	<b>TION</b>									
1. BASIC FILING	S, SEARCH, AN	ID EXAM							ı	
	FILIN	NG FEES Small E		RCH FEES Small Entity	EXAN	AINATION Small	I FEES Entity			
Application Ty	pe <u>Fee (</u>				<u>Fee</u>			Fees Paid (\$)	ı	
Utility	300	150	500	250	200	) 10	0	\$1000.00	1	
Design	200	100	100	50	130	) 6	5			
Plant	200	100	300	150	160	) 8	0	<del></del>		
Reissue	300	150	500	250	600	30	0			
Provisional	200	100	0	0	(	)	0			
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)										
Fee Description Each claim ov			-	50	<u>Fee (\$)</u> 25					
Each indepen				200	100					
Multiple depe				360	180					
Total Claims	<u>e Paid (\$)</u>	<u>Multiple Dep</u>			endent Claims					
	or HP =2	x		100.00		<u> </u>	ee (\$)	Fee Paid (\$)		
HP = highest numl	per of total claims pa Extra C			e Paid (\$)						
43 a	rHP =1	x _	200 = 2	200.00						
3. APPLICATIO	HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)										
Other (e.g., late filing surcharge): Recording Patent Assignment 40.00										
SUBMITTED BY		$\sim$ $\sim$	1//	Registration No.	40.0:-		Telephone	<sup>3</sup> 203-845-4562	-	
Signature Registration No. 43,612										
Name (Print/Type) K	imberly V. Perry,	Senior Pate	Int Coubsel				Date	3/24/05		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.